(Status) (patent d/pending/abandoned)

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION ENGLISH LANGUAGE DECLARATION

As a below named inventor, I hereby declare that:

(Application Serial No.)

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled

•		E CANOPY FOR INFANT	CARE A	PPARATUS	
the specification	on of which (check is attached hereto				
	was filed on	·•			
	as Application Ser				
	and was amended	d on (if applicable)			
		red and understand the co			ied specification
		se information which is ma e of Federal Regulations, §		the examination o	of this applicatio
application(s) f	or patent or invent patent or invento	benefits under Title 35, tor's certificate listed below or's certificate having a fil	and hav	e also identified b	elow any foreig
PRIOR FOREI	GN APPLICATION	N(S)			
				F	Priority Claime
					□Yes/□No
					□Yes/□No
(Numb	er)	(Country)	(Day/M	onth/Year Filed)	
listed below ar in the prior Un States Code § Code of Feder and the nation	nd, insofar as the s ited States applica §112, I acknowled ral Regulations, §I.	Title 35, United States Coosubject matter of each of thation in the manner provided ge the duty to disclose number of the state of this appliance. CATION(S)	ne claims ed by the naterial in ween the	of this application first paragraph of nformation as def	n is not disclose f Title 35, Unite fined in Title 37
				1	

(Filing Date)

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION ENGLISH LANGUAGE DECLARATION (Cont'd)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of the Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

Roger M. Rathbun, Regn. No. 24,964	

SEND CORRESPONDENCE TO: Roger M. Rathbun, Esq., 13 Margarita Court, Hilton Head Island, SC 29926

DIRECT TELEPHONE CALLS TO: Roger M. Rathbun (843) 682-2501

(Attorney Name and Telephone Number)

FULL NAME OF FIRST JOINT INVENTOR	
Michael H. Mackin	
INVENTOR'S SIGNATURE	DATE # DEC 2003
RESIDENCE	
9043 Furrow Avenue, Ellicott City, MD 21042	
CITIZENSHIP	
Citizen of the United States	
POST OFFICE ADDRESS	
Same as above	